

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
REQUEST FOR FILING APPLICATION UNDER 37 C.F.R. 1.53(b)
WITHOUT FILING FEE AND/OR WITHOUT EXECUTED INVENTOR'S DECLARATION

Mail Stop Patent Application

Atty. Dkt. 1035-480

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450
Sir:

Date: November 12, 2003

This is a request for filing a new PATENT APPLICATION under Rule 53(b) entitled:

DATA SIGNAL LINE DRIVING METHOD, DATA SIGNAL LINE DRIVING CIRCUIT, AND DISPLAY DEVICE USING THE SAME

without a filing fee and/or without an executed inventor's oath/declaration.

This application is made by the below identified inventor(s). Attached hereto are the following papers:

- ☐ Newly executed Declaration, ☐ Copy of Declaration from prior application, ☒ Abstract
☐ Please **delete** the following inventors in the continuation/division/continuation-in-part application:

Deleted persons:

97 pages of specification and claims (including 22 numbered claims), and
25 sheets of accompanying drawing/s.

☐ Attached is a Power of Attorney.

☒ Priority is hereby claimed under 35 U.S.C. § 119 based on the following foreign applications:

Application Number	Country	Day/Month/Year Filed
2002-328835	JP	12 November 2002

, respectively, the entire content of which is hereby incorporated by reference in this application..

- ☒ Certified copy(ies) of foreign application(s) is/are attached.
☐ Certified copy(ies) filed on _____ in prior application no. _____ filed _____
☐ This application claims the benefit of Provisional Application No. _____, filed _____, the entire content of which is hereby incorporated by reference in this application.
☐ This application is a ☐ continuation/☐ division/☐ continuation-in-part of Application No. _____, filed _____, the entire content of which is hereby incorporated by reference in this application.
☐ Petition filed in prior application to extend its life to insure co-pendency.
☐ The prior application is assigned to _____
☐ It is hereby requested that the Examiner consider the art cited in the above parent application(s) by applicant and/or the Examiner for the reasons stated therein. A listing of that art is attached, but pursuant to Rule 98(d) copies are not required.
☐ Applicant claims "small entity" status. ☐ "Small entity" statement attached.
☐ Please enter the attached and/or below preliminary amendment **prior** to calculation of filing fee:

- ☒ Also attached: ☒ Information Disclosure Statement; ☐ Non-Publication Request; ☐ Nucleotide and/or Amino Acid Sequence Submission; ☐ Statement deleting Inventor(s) named in prior application; ☒ Other: Table (1 sheet), PTO Form 1449 and 5 Cited References

- | | | | | |
|----|-------------------|---|-----------------|---------------|
| 1. | Inventor: | Kazuhiro | MAEDA | Japanese |
| | | (first) | (last) | (citizenship) |
| | Residence: (city) | Nara | (state/country) | Japan |
| | Mailing Address: | 2339-1-A203, Furuichi-cho Nara-shi, Nara, Japan | | |
| | (Zip Code) | 630-8424 | | |
| 2. | Inventor: | Sachio | TSUJINO | Japanese |
| | | (first) | (last) | (citizenship) |
| | Residence: (city) | Osaka | (state/country) | Japan |
| | Mailing Address: | 2-69-14, Kyuhoen Yao-shi, Osaka, Japan | | |
| | (Zip Code) | 581-0817 | | |

☒ See attached sheet(s) for additional inventor(s) information!!

Addr ss all future communications to NIXON & VANDERHYE P.C., 1100 North Glebe Road, 8th Floor, Arlington, VA 22201.
Correspondence Address: NIXON & VANDERHYE P.C.

Customer Number:

23117

By Atty: H. Warren Burnam, Jr., Reg. No. 29,366

Telephone: (703) 816-4000

Facsimile: (703) 816-4100

HWB:ecb

Signature: _____

3.	Inventor:	Hajime (first)	MI	WASHIO (last)	Japanese (citizenship)
	Residence: (city)	Nara (state/country) Japan			
	Mailing Address:	6-6, Kaminosho Sakurai-shi, Nara, Japan			
	(Zip Code)	633-0061			
4.	Inventor:	Yuhji (first)	MI	ASOH (last)	Japanese (citizenship)
	Residence: (city)	Nara (state/country) Japan			
	Mailing Address:	5-6-9, Jingu Nara-shi, Nara, Japan			
	(Zip Code)	631-0804			
5.	Inventor:	(first)	MI	(last)	(citizenship)
	Residence: (city)	(state/country)			
	Mailing Address:	, ,			
	(Zip Code)				
6.	Inventor:	(first)	MI	(last)	(citizenship)
	Residence: (city)	(state/country)			
	Mailing Address:	, ,			
	(Zip Code)				
7.	Inventor:	(first)	MI	(last)	(citizenship)
	Residence: (city)	(state/country)			
	Mailing Address:	, ,			
	(Zip Code)				
8.	Inventor:	(first)	MI	(last)	(citizenship)
	Residence: (city)	(state/country)			
	Mailing Address:	, ,			
	(Zip Code)				
9.	Inventor:	(first)	MI	(last)	(citizenship)
	Residence: (city)	(state/country)			
	Mailing Address:	, ,			
	(Zip Code)				
10.	Inventor:	(first)	MI	(last)	(citizenship)
	Residence: (city)	(state/country)			
	Mailing Address:	, ,			
	(Zip Code)				
11.	Inventor:	(first)	MI	(last)	(citizenship)
	Residence: (city)	(state/country)			
	Mailing Address:	, ,			
	(Zip Code)				

NOTE: FOR ADDITIONAL INVENTORS, check box ☐ and attach sheet with same information and signature and date for each.